

The Hospitality City

CERTIFICATE OF OCCUPANCY CITY OF WAVELAND

This Certificate is issued pursuant to the requirements of the 2012 International Codes Council certifying that at the time of issuance, this structure was in compliance with the various ordinances of the City of Waveland regulating building construction or use.

Certificate #:1718905

Issued to: GARCIA, JASON

Building Address: 104 NICHOLSON AVE

City, State, Zip: WAVELAND, MS 39576

Expires: End of occupancy

Issued Date: 05-31-2018

Occupancy Type: SFR HOME

Sprinkler System Required: NO

Special Conditions: NONE

Suilding Official

81.18.5

Date

U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSUF	RANCE COMPANY USE	
A1. Building Owner's Name					Policy Num	ber:	
Garcia	2018-2			CONTRACTOR		water All modelling and a second and a second	
A2. Building Street Address (in Box No.	cluding Apt., Unit, Suite	, and/o	r Bldg. No.) or P.O.	Route and	Company N	AIC Number:	
104 Nicholson Ave							
City			State		ZIP Code		
Waveland			Mississippi		39576		
A3. Property Description (Lot a Part Lots 48 & 50 First Ward	nd Block Numbers, Tax	Parcel	Number, Legal De	scription, etc.)			
A4. Building Use (e.g., Resider	ntial, Non-Residential, A	ddition	Accessory, etc.)	Residential			
A5. Latitude/Longitude: Lat. 3	0-17-24 L	ong. 8	9-21-22	Horizontal Datur	n: NAD 1	1927 X NAD 1983	
A6. Attach at least 2 photograp	hs of the building if the	Certific	ate is being used to	obtain flood insur	ance.		
A7. Building Diagram Number	5						
A8. For a building with a crawls	pace or enclosure(s):						
a) Square footage of craw	space or enclosure(s)		0 sq ft				
b) Number of permanent fl	ood openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	e adjacent gr	ade 0	
c) Total net area of flood o	penings in A8.b 0	S	q in				
d) Engineered flood openia	ngs? Tyes X No)					
A9. For a building with an attac			#				
a) Square footage of attact	•						
b) Number of permanent f				ot above adjacent	grade	0	
c) Total net area of flood o	penings in A9.b	0	sq in				
d) Engineered flood openi	ngs? 🗌 Yes 🕱 N	0					
	ECTION B - FLOOD IN	ISURA		·	ATION	i e	
B1. NFIP Community Name & 0 Waveland 285262	Community Number		B2. County Name Hancock			B3. State	
VVaveland 200202			Haricock			Mississippi	
B4. Map/Panel B5. Suffix Number	B6. FIRM Index		IRM Panel ffective/	B8. Flood Zone(s	B9. Ba	se Flood Elevation(s) ne AO, use Base	
	Date	R	evised Date	A.E.	Flo	od Depth)	
28045C0361 D	10/16/2009	10/16	/2009	AE	20		
B10 Indicate the source of the	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
☐ FIS Profile ☒ FIRM	No.			par ontoroa in itor			
	_ ,						
B11. Indicate elevation datum	used for BFE in Item B9): N	GVD 1929 🔀 NA	VD 1988 ∐ O	ther/Source:		
B12. Is the building located in	a Coastal Barrier Resou	rces S	ystem (CBRS) area	or Otherwise Prot	ected Area (OPA)? ☐ Yes ☒ No	
Designation Date:	П	CBRS	□ОРА				
			_				
1							

OMB No. 1660-0008 **ELEVATION CERTIFICATE** Expiration Date: November 30, 2018 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 104 Nicholson Ave City State ZIP Code Company NAIC Number Waveland Mississippi 39576 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:

Construction Drawings*

Building Under Construction* X Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Vertical Datum: NAVD88 Benchmark Utilized: GPS Derived Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 🔀 NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. 26.7 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) × feet ☐ meters 36 6 x feet b) Top of the next higher floor meters N/A c) Bottom of the lowest horizontal structural member (V Zones only) × feet ☐ meters N/A d) Attached garage (top of slab) x feet ☐ meters 26 53 x feet e) Lowest elevation of machinery or equipment servicing the building meters (Describe type of equipment and location in Comments) 15.3 x feet f) Lowest adjacent (finished) grade next to building (LAG) meters 15.5 x feet g) Highest adjacent (finished) grade next to building (HAG) meters 15.5 h) Lowest adjacent grade at lowest elevation of deck or stairs, including x feet meters structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Were latitude and longitude in Section A provided by a licensed land surveyor?

☑ Yes ☐ No X Check here if attachments. License Number Certifier's Name P.E. 19732 Jason P. Chiniche Title Project Manager Company Name James J. Chiniche PA, INC. Here Address 412 HWY 90 Suite 2 City State ZIP Code Bay St. Louis Mississippi 39520 MISS15 Telephone Signature Date (228) 467-6755 05/29/2018 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) NOTE: The description in A3 above is for information only & not to certify the building location. The base flood elevation (BFE) is per Map Section B4. Recommend verification of (BFE) by local building official. The flood zone is determined by graphic plotting, owner is responsible for coordinating this certificate with contractor and/or building official as needed. C2e. is mechanical air handler unit. TBM Is a mag nail thru marker in centerline of pavement EL: 14.5 ft.

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, an 104 Nicholson Ave	Policy Number:						
	State Mississippi	ZIP Code 39576	Company NAIC Number				
SECTION E – BUILDING EL FOR ZON	EVATION INFORMA E AO AND ZONE A	ATION (SURVEY NOT (WITHOUT BFE)	REQUIRED)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below							
the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement,			r the elevation is above or below				
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet _ meter	rs above or below the HAG.				
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flood of		feet meter					
the next higher floor (elevation C2.b in the diagrams) of the building is							
E3. Attached garage (top of slab) is		feet	s above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		feet meter	rs above or below the HAG.				
E5. Zone AO only: If no flood depth number is availabelight floodplain management ordinance? Yes			cordance with the community's certify this information in Section G.				
SECTION F - PROPERTY OW	NER (OR OWNER'S	REPRESENTATIVE) C	ERTIFICATION				
The property owner or owner's authorized representat community-issued BFE) or Zone AO must sign here. T	ve who completes Se he statements in Sect	ctions A, B, and E for Zo ions A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.				
Property Owner or Owner's Authorized Representative	s's Name						
Address	City	St	ate ZIP Code				
Signature	Date	Te	elephone				
Comments							
			Check here if attachments.				

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 104 Nicholson Ave	Policy Number:
City State ZIP Code Waveland Mississippi 39576	Company NAIC Number
SECTION G - COMMUNITY INFORMATION (OPTIONAL	-)
The local official who is authorized by law or ordinance to administer the community's floodplain r Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and s used in Items G8–G10. In Puerto Rico only, enter meters.	nanagement ordinance can complete ign below. Check the measurement
G1. The information in Section C was taken from other documentation that has been signed engineer, or architect who is authorized by law to certify elevation information. (Indicate data in the Comments area below.)	and sealed by a licensed surveyor, the source and date of the elevation
G2. A community official completed Section E for a building located in Zone A (without a FE or Zone AO.	MA-issued or community-issued BFE)
G3. The following information (Items G4–G10) is provided for community floodplain manage	ement purposes.
G4. Permit Number G5. Date Permit Issued G6	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for: New Construction Substantial Improvement	
G8. Elevation of as-built lowest floor (including basement) of the building:	eet meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:	eet meters Datum
G10. Community's design flood elevation:	eet meters Datum
Local Official's Name Title	
Community Name Telephone	
Signature Date	
Comments (including type of equipment and location, per C2(e), if applicable)	
	☐ Check here if attachments.

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A 104 Nicholson Ave	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Waveland	Mississippi	39576	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Front



Photo Two

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 104 Nicholson Ave	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Waveland	Mississippi	39576	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One

Photo One Caption TBM EL: 14.5

Photo Two

Photo Two

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PI	OR INSURANCE COMPANY USE						
A1. Building Owner's Name	Po	blicy Number:					
Garcia	2018-006						
A2. Building Street Address (including Apt., Box No.	Unit, Suite, and/or Bldg. No.) or P.O.	Route and Co	ompany NAIC Number:				
104 Nicholson Ave							
City	State		P Code				
Waveland	Mississippi		576				
A3. Property Description (Lot and Block Nu Part Lots 48 & 50 First Ward	mbers, Tax Parcel Number, Legal Des	scription, etc.)					
A4. Building Use (e.g., Residential, Non-Re	esidential, Addition, Accessory, etc.)	Residential					
A5. Latitude/Longitude: Lat. 30-17-24	Long. <u>89-21-22</u>	Horizontal Datum:	☐ NAD 1927 🔀 NAD 1983				
A6. Attach at least 2 photographs of the bu	ilding if the Certificate is being used to	obtain flood insurance	ce.				
A7. Building Diagram Number5							
A8. For a building with a crawlspace or end	losure(s):						
a) Square footage of crawlspace or en	closure(s) 0 sq ft						
b) Number of permanent flood opening	s in the crawlspace or enclosure(s) wi	thin 1.0 foot above ac	djacent grade0				
c) Total net area of flood openings in A	.8.b 0 sq in						
d) Engineered flood openings?	′es ⊠ No						
A9. For a building with an attached garage:							
a) Square footage of attached garage							
b) Number of permanent flood opening		ot above adjacent gra	de				
c) Total net area of flood openings in A	9.b 0 sq in						
d) Engineered flood openings?							
	FLOOD INSURANCE RATE MAP						
B1. NFIP Community Name & Community I	AND 1 19.2		B3. State				
Waveland 285262	Hancock		Mississippi				
B4. Map/Panel B5. Suffix B6. FIRM Date		B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base				
	Revised Date	٨٦	Flood Depth)				
28045C0361 D 10/16/20	09 10/16/2009	AE	20				
B10. Indicate the source of the Base Flood	Elevation (BFE) data or base flood de	epth entered in Item B	9:				
The second of the second secon	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile X FIRM Community Determined Other/Source:						
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No							
		or Otherwise Flotect	Salarea (OLA): [] 165 [A] NO				
Designation Date:	CBRS OPA						
1							

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 104 Nicholson Ave	Policy Number:		
City State Waveland Miss	e ZIP (issippi 3957	Code 76	Company NAIC Number
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY RI	EQUIRED)
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when co C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), None Complete Items C2.a–h below according to the build Benchmark Utilized: GPS Derived Indicate elevation datum used for the elevations in item NGVD 1929 NAVD 1988 Other/S Datum used for building elevations must be the same a) Top of bottom floor (including basement, crawlspane) Top of the next higher floor c) Bottom of the lowest horizontal structural members d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment serve (Describe type of equipment and location in Common f) Lowest adjacent (finished) grade next to building g) Highest adjacent grade at lowest elevation of declaration of declaration structural support	n Drawings* Buildinstruction of the buildin	ding Under Construction is complete. FE), AR, AR/A, AR/ In Item A7. In Puert NAVD88 N. FE.	Check the measurement used.
SECTION D – SURVEYOR,	ENGINEER, OR ARC	CHITECT CERTIF	ICATION
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	veyor, engineer, or arc my best efforts to inter der 18 U.S. Code, Sec	hitect authorized by pret the data availation 1001.	y law to certify elevation information.
Certifier's Name Jason P. Chiniche	License Number P.E. 19732	· · · · · · · · · · · · · · · · · · ·	416611111112220
Title Project Manager Company Name James J. Chiniche PA, INC. Address 412 HWY 90 Suite 2 City	State	ZIP Code	Seal Here 19732
Bay St. Louis	Mississippi	39520	MISSIS MISSIS OF THE PROPERTY
Signature	Date 01/09/2018	Telephone (228) 467-6755	
Copy all pages of this Elevation Certificate and all attachments (including type of equipment and location, per TBM Is a mag nail thru marker in centerline of pavement I	C2(e), if applicable)	ticial, (2) insurance	agent/company, and (3) building owner.

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/ 104 Nicholson Ave	Policy Number:						
		Code 576	Company NAIC Number				
SECTION E – BUILDING ELE FOR ZONE	EVATION INFORMATION AND ZONE A (WI		REQUIRED)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.							
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).a) Top of bottom floor (including basement,							
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet meter	rs above or below the HAG.				
crawlspace, or enclosure) is		feet meter					
E2. For Building Diagrams 6–9 with permanent flood on the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in Sect	ion A Items 8 and/or ☐ feet ☐ meter					
E3. Attached garage (top of slab) is		feet meter					
E4. Top of platform of machinery and/or equipment servicing the building is		. feet meter	rs ☐ above or ☐ below the HAG.				
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the bottom No Unknown. Th	n floor elevated in ac	ccordance with the community's				
SECTION F - PROPERTY OWN	IER (OR OWNER'S REF	PRESENTATIVE) CI	ERTIFICATION				
The property owner or owner's authorized representativ community-issued BFE) or Zone AO must sign here. The	re who completes Sections statements in Sections	ns A, B, and E for Zo a A, B, and E are cor	one A (without a FEMA-issued or rrect to the best of my knowledge.				
Property Owner or Owner's Authorized Representative's	s Name						
Address	City	St	tate ZIP Code				
Signature	Date	T€	elephone				
Comments							

IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box 104 Nicholson Ave	No. Policy Number:						
CityStateZIP CodeWavelandMississippi39576	Company NAIC Number						
SECTION G - COMMUNITY INFORMATION (OPTIO	DNAL)						
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.							
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)							
G2. A community official completed Section E for a building located in Zone A (without or Zone AO.	a FEMA-issued or community-issued BFE)						
G3. The following information (Items G4–G10) is provided for community floodplain ma	anagement purposes.						
G4. Permit Number G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued						
G7. This permit has been issued for: New Construction Substantial Improven	nent						
G8. Elevation of as-built lowest floor (including basement) of the building:	☐ feet ☐ meters Datum						
G9. BFE or (in Zone AO) depth of flooding at the building site:	feet meters Datum						
G10. Community's design flood elevation:	☐ feet ☐ meters Datum						
Local Official's Name Title							
Community Name Telephone							
Signature Date							
Comments (including type of equipment and location, per C2(e), if applicable)							
	☐ Check here if attachments.						

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A 104 Nicholson Ave	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Waveland	Mississippi	39576	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Rear of Structure



Photo Two

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including A 104 Nicholson Ave	Policy Number:		
City Waveland	State Mississippi	ZIP Code 39576	Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo One

Photo One Caption TBM EL: 14.5

Photo Two

Photo Two Caption

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSURANCE COMPANY USE	
A1. Building Owner's Name GARCIA						ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number 104 NICHOLSON AVE.						
City WAVELAND			State Mississippi		ZIP Code 39576	
A3. Property Description (Lo PART LOTS 48 & 50, FIRST		Parce	l Number, Legal De	scription, etc.)		
A4. Building Use (e.g., Resid	ential, Non-Residential, A	ddition	, Accessory, etc.)	Residential		
A5. Latitude/Longitude: Lat.	30-17-24	_ong	89-21-22.4	Horizontal Datum	n: NAD	1927 X NAD 1983
A6. Attach at least 2 photogr	aphs of the building if the	Certific	cate is being used to	o obtain flood insur	ance.	
A7. Building Diagram Numbe	r5					
A8. For a building with a crav	vlspace or enclosure(s):					
a) Square footage of cra	wlspace or enclosure(s)	-	0 sq ft			4
b) Number of permanent	flood openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade0
c) Total net area of flood	openings in A8.b0	\$	sq in			
d) Engineered flood ope	nings? ☐ Yes ☒ No)				
A9. For a building with an atta	ached garage:					
a) Square footage of atta	ached garage0		sq ft			
b) Number of permanent	flood openings in the atta	ached (garage within 1.0 fo	ot above adjacent (grade	0
c) Total net area of flood	openings in A9.b	0	sq in			
d) Engineered flood oper	nings? Yes X No	0				
	SECTION B - FLOOD IN	ISURA	 		TION	
B1. NFIP Community Name 8 WAVELAND 285262	Community Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel B5. Suffi. Number	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
28045C0361 D	10/16/2009		6/2009	AE	20	od Deptil)
B10. Indicate the source of the	e Base Flood Elevation (I	BFE) d	ata or base flood de	epth entered in Item	n B9:	
☐ FIS Profile 🗵 FIRM	Community Determ	ined [Other/Source:		***************************************	
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:						
B12. Is the building located in	n a Coastal Barrier Resou	rces S	ystem (CBRS) area	or Otherwise Prote	ected Area (OPA)? ☐ Yes ☒ No
Designation Date:		BRS	□ ОРА			100 (100 (100 (100 (100 (100 (100 (100

MPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 104 NICHOLSON AVE.		Policy Number:		
City State ZIP C WAVELAND Mississippi 39576		Company NAIC Number		
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
C1. Building elevations are based on: 🗵 Construction Drawings* 🔲 Building Under Construction* 🔲 Finished Construction				
*A new Elevation Certificate will be required when construction of the building	•	AF AB/A4 AGG AB/AH AB/AG		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: GPS DIRIVED Vertical Datum: NAVD 1988				
Indicate elevation datum used for the elevations in items a) through h) below.				
☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BF	:E			
Datum used for building elevations must be the same as that used for the br		Check the measurement used.		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)		X feet meters		
b) Top of the next higher floor	N/A	X feet meters		
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A.	X feet meters		
d) Attached garage (top of slab)	N/A.	x feet meters		
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 	21. 0	X feet meters		
f) Lowest adjacent (finished) grade next to building (LAG)	<u> </u>	x feet meters		
g) Highest adjacent (finished) grade next to building (HAG)	<u>15</u> . <u>4</u>	X feet meters		
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	N/A	X feet meters		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION				
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.				
Were latitude and longitude in Section A provided by a licensed land surveyor?	⊠Yes □No	Check here if attachments.		
Certifier's Name License Number		and the same and t		
JASON P. CHINICHE P.E. 19732 Title		ON P. CHINI		
PROJECT MANAGER		PROFES C		
Company Name JAMES J. CHINICHE, PA, INC.		Seal		
Address		Here 19732		
412 HWY. 90, SUITE 2		E OF MISSISS		
	ZIP Code 39520	MILO MILO		
	Telephone (228) 464-6755			
Copy all pages of this Elevation Certificate and all attachments for (1) community office	cial, (2) insurance	agent/company, and (3) building owner.		
Comments (including type of equipment and location, per C2(e), if applicable) NOTE: The description in A3. above is for information only & not to certify the building location. The Base Flood Elevation (BFE) is per map in section B4. Recommend verification of (BFE) by local building official. The flood zone is determined by graphic plotting only. Owner is responsible for coordinating this certificate with Contractor and/or Building Official as needed. Waveland freeboard = 1 ft. Section C1 Construction Drawings: As of this date, no constructions plans have been provided by client. TBM is a man nail thru marker in centerline of pavement, elevation 14.5 ft.				

Chancery Clerk Instrument Recording Receipt

Book: Deed

Inst: Agreement

Book/Page: 2018 / 6671

Archiver Record Management		1.00
Deed		11.00
Recording Fee		0.00
Total Fees :	\$	12.00
Total Due :	\$	12.00
Cash Paid :	\$	12.00
Total Paid :	\$	12.00
Change Due :	\$	0.00

Have a Nice Day Timothy A Kellar

Term/Cashier: ANCH-GJORDAN-PC / GLORIA

Tran: 12837.182723.218807 Printed: 05-30-2018 08:41:34 AM WAVELAND

My Commission Expires Dec. 31, 2019

2018 6671 Recorded in the Above Deed Book & Page 05-30-2018 08:41:33 AM

NONCONVERSION AGREEMENTImothy A Kellar with Hancock County

CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 30th day of May, 2018 by Jason Garcia
("Owner") having an address/at
WITNESSETH:
WHEREAS, the Owner is the record owner of all that real property located at Not Not No Ison Av in the City of Waveland, Ms. in the County of Hancock,
designated in the Tax Records as 1/1/18 - 2 - 01 - 138,000
WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of
Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ordinance of Number
342 and under Permit Number 17 18 905.
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the
following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner,
his heirs, personal representatives, successors, future owners, and assigns.
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:
1. The structure or part thereof to which these conditions apply is:
2. At this site, the Base Flood Elevation is 70+1 feet above mean sea level, National Geodetic
Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited
storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or
plumbing devices shall not be installed below the Base Flood Elevation.
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain
equipped with openings as shown on the Permit.
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal
action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration.
Such inspections will be conducted upon due notice to the Owner and no more frequently than once
each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7. Other conditions:
In witness whereof the undersigned set their hands and seals this 30 day of may, 20 18
Sarret Lore la
(Seal) Withess
State of Mississippi, County of Hancock
Timothy A Keilar Personally appeared before me, the undersigned
Chancery Clerk authority in and for the said county and state, On this 30 day of 10 within
By: Nedde DC on this 30 day of 11 au 20 8, within my jurisdiction, the within named Garcia, Barrett Gerard
my junsdiction, the within haired Saveta Barrers Berard who acknowledged that He executed the

above and foregoing instrument.

EXHIBIT "A"

(File No.: 1122-33217)

2017 8433 Deed Book & Page 2018 6671.001 Deed Book & Page

Legal Description

COMMENCING at a found iron pipe at the intersection of the Northeasterly margin of Nicholson Avenue with the Southeasterly margin of Sonier Street, said point also being described as the West corner of Lot 50, First Ward, Town of Waveland, Hancock County, Mississippi; thence South 44 degrees 39 minutes 11 seconds East 250.00 feet along said margin of Nicholson Avenue to a set half inch iron rod for the POINT OF BEGINNING; thence continuing along said margin South 44 degrees 39 minutes 11 seconds East 57.85 feet to a found half inch iron rod; thence North 70 degrees 06 minutes 39 seconds East 142.61 feet to a found half inch iron rod on the Westerly line of land now or formerly owned by Wavelawn, LLC; thence along said line North 33 degrees 14 minutes 20 seconds West 110.56 feet to a found half inch iron rod; thence continuing along said line North 44 degrees 40 minutes 05 seconds West 9.57 feet to a found iron pipe; thence South 45 degrees 12 minutes 49 West 151.37 feet to the POINT OF BEGINNING; containing 12,773.03 square feet or 0.29 acres, more or less, and being part of Lots 48 and 50, First Ward, Town of Waveland, Hancock County, Mississippi. All as per survey by James J. Chiniche, PA, Job #2017-263(B), dated 06/28/17, a copy of which is attached hereto and made a part hereof.

Being part of that property described (1st description, unidentified) in the Warranty Deed to Claverie Properties of St. Bernard, LLC dated 09/11/2008 and recorded 10/02/2008 in Book 2008, Page 22744; but, correctly described in that Corrected Deed dated 12/30/1974 and recorded 03/07/1975 in Book Z-0, Page 533; all in the office of the Chancery Clerk of Hancock County, Mississippi.

Indexing Instructions: Pt. Lots 48 & 50, 1st Ward, Waveland, Hancock Co., MS.

Mlaira Jordan

Hancock County I certify this instrument was filed on 05-30-2018 08:41:33 AM and recorded in Deed Book 2018 at pages 6671 - 6671,001 Timothy A Kellar